



REPLACEMENT PLATE REQUEST FORM

****Agency must return all issued old plate(s) to State Fleet**

DATE:

DEPARTMENT/DIVISION:

REQUESTED BY:

Authorized Agent

TEL NO:

STATE PLATE:

VEHICLE#/BARCODE:

VEHICLE DESCRIPTION: Yr

Make

Model

NUMBER OF PLATES NEEDED:

NOTE: OLD PLATES/ MUST BE RETURNED TO STATE FLEET WHEN PICKING UP THE NEW

DOES REQUESTING AGENCY HAVE THE OLD/WORN PLATES TO TURN IN?

YES - (all issued plates)

NO - If answering "NO" (ie: none or one from set) , agency must also complete an **Affidavit for Cancellation of Registration for Lost Plates**

*******FOR STATE FLEET USE ONLY*******

OLD PLATES RETURNED: NO YES DATE RET'D

NUMBER OF PLATES RETURNED:

PLATES PICKED UP BY:

PRINTED NAME

SIGNATURE

DATE